

117TH CONGRESS
1ST SESSION

H. R. 5816

To prohibit the Federal Government, or State or local government or other entity receiving Federal funding, from requiring any citizen to be vaccinated, including Federal agencies from requiring its employees to take any vaccination, without the citizen being fully advised in writing of all known potential risks from the vaccine and consultation with a physician followed by the voluntary informed consent of the citizen, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 2, 2021

Mr. GOHMERT (for himself, Mr. DUNCAN, Mr. GOOD of Virginia, Mr. WEBER of Texas, Mr. LAMALFA, Mr. BABIN, Mr. BIGGS, Mr. NORMAN, Mr. MAST, and Mr. GAETZ) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To prohibit the Federal Government, or State or local government or other entity receiving Federal funding, from requiring any citizen to be vaccinated, including Federal agencies from requiring its employees to take any vaccination, without the citizen being fully advised in writing of all known potential risks from the vaccine and consultation with a physician followed by the voluntary informed consent of the citizen, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “National Informed
3 Consent Exemption (NICE) Act”.

4 **SEC. 2. FINDINGS.**

5 The Congress finds the following:

6 (1) The Constitution does not permit a vaccine
7 mandate, including a mandate by the executive
8 branch imposed on Federal employees as a condition
9 to maintain the employment they need to feed them-
10 selves or their families.

11 (2) It is unconscionable for any entity to use
12 force or coercion to compel individuals to take a vac-
13 cine without their informed consent, and even more
14 egregiously unconscionable for a vaccine to be ad-
15 ministered under emergency use authorization
16 (EUA) without adequate warnings of known poten-
17 tial risks to that specific employee or patient. The
18 rights of the American people to free exercise of reli-
19 gion, due process of law, and protection from reli-
20 gious discrimination, includes the fundamental right
21 to decline vaccination and testing for infectious dis-
22 ease without penalty.

23 (3) Mandating vaccines, including experimental
24 vaccines, does not fall within any of the executive
25 authorities, according to article II, section 2 of the
26 United States Constitution.

1 (4) According to the American Heritage Med-
2 ical Dictionary, informed consent is the consent by
3 a person to undergo a medical procedure after re-
4 ceiving all material information regarding risks, ben-
5 efits, and alternatives.

6 (5) Vaccines in America are licensed and regu-
7 lated federally.

8 (6) Product inserts for vaccines approved by the
9 United States Food and Drug Administration
10 (FDA) evidence that:

11 (A) Each vaccine on the routine vaccina-
12 tion schedules published by the U.S. Centers for
13 Disease Control and Prevention (CDC) has
14 never been clinically evaluated in humans for its
15 long-term potential to cause cancer, impair fer-
16 tility, and mutate genes.

17 (B) The pivotal clinical trial relied upon by
18 the Food and Drug Administration (FDA) for
19 approval of each vaccine on the CDC schedule
20 did not evaluate the safety of the vaccine (1)
21 for at least one year after the vaccine is admin-
22 istered, and (2) against a control group that re-
23 ceived (A) a truly inert placebo, or (B) another
24 vaccine approved based on a pivotal clinical

1 trial that included a control group that received
2 a truly inert placebo.

3 (7) In 2018, the United States Department of
4 Health and Human Services (HHS) published that
5 it has no evidence that its Secretary completed any
6 of the 16 required vaccine safety reports, bi-annually
7 pursuant to U.S.C. 300aa-27(c) (“Report. Within 2
8 years after December 22, 1987, and periodically
9 thereafter . . .”).

10 (8) In 2018, the FDA published, “Until a vac-
11 cine is given to the general population, all potential
12 adverse events cannot be anticipated.”.

13 (9) In 2020, the National Institutes of Health
14 (NIH) published, “The ‘gold standard’ for testing
15 interventions in people is the ‘randomized, placebo-
16 controlled’ clinical trial, in which volunteers are ran-
17 domly assigned to a test group receiving the experi-
18 mental intervention or a control group receiving a
19 placebo (an inactive substance that looks like the
20 drug or treatment being tested). Comparing results
21 from the two groups suggests whether changes in
22 the test group result from the treatment or occur by
23 chance.”.

24 (10) The field of medicine and science is ad-
25 vancing at a rapid pace. The Institute of Medicine

1 (IOM) has reported that it can take up to 17 years
2 for a new best practice to reach the average physi-
3 cian and surgeon. It is prudent to recognize doctors'
4 discretion when applying all of their knowledge,
5 training, expertise, and new developments in the
6 care of their patients.

(11) Vaccine ingredients are commonly sourced from foreign nations.

11 SEC. 3. PROHIBITION ON MANDATORY VACCINATION AND
12 INFECTIOUS DISEASE TESTING.

13 (a) The Federal Government, and persons receiving
14 Federal funding, are prohibited from requiring any citizen
15 to be vaccinated or tested for an infectious disease without
16 due process of law. Citizens have the fundamental right
17 to decline vaccination for an infectious disease without
18 penalty.

19 (b) Vaccination shall henceforth be optional to citi-
20 zens, except as provided in section 5, for their participa-
21 tion in society, including but not limited to education,
22 travel, employment, government service, housing, social
23 welfare programs, access to courts, and medical care.

24 (c) Any laws, regulations, or policies, purporting to
25 authorize any form of discrimination against any citizen,

1 whether in the form of denial of education, travel, employ-
2 ment, government service, housing, social welfare pro-
3 grams, access to courts, and medical care, which is based
4 solely upon their refusal to consent to vaccination for an
5 infectious disease, are repugnant to the United States
6 Constitution and are therefore unenforceable, except as
7 provided in section 5. Nor shall any laws, regulations, or
8 policies, require an individual to provide any “vaccine
9 passport” or documentation, whether digital or otherwise,
10 certifying vaccination or post-infection recovery to gain ac-
11 cess to, entry upon, or service from an institution within
12 the United States, except as provided in section 5.

13 (d) The exemption from vaccination for infectious
14 disease provided by this Act shall be known as the Na-
15 tional Informed Consent Exemption (“NICE”) and may
16 be exercised by any individual, including on behalf of their
17 child or dependent, without any precondition or require-
18 ment, except as provided in section 5.

19 (e) With the exception of emancipated minors, no
20 child shall be vaccinated without (1) the consent of each
21 parent or guardian for the child, or (2) the consent of one
22 parent or guardian for the child and prior written 3-day
23 notification to the other parent or guardian(s) for the
24 child regarding the vaccination appointment.

1 **SEC. 4. ENFORCEMENT.**

2 (a) Any person who has been the victim of a violation
3 of this Act may bring a civil action for damages against
4 any responsible party. The plaintiff may seek actual dam-
5 ages, compensatory damages, punitive damages, injunctive
6 relief, any combination of those, or any other appropriate
7 relief. A prevailing plaintiff may also be awarded attor-
8 ney's fees and court costs.

9 (b) Anyone or any entity that provides false informa-
10 tion intending to influence a person to be vaccinated shall
11 be liable to the person vaccinated or that person's heirs
12 for any and all damages resulting from such vaccination,
13 including actual damages, compensatory damages, puni-
14 tive damages, as well as attorney's fees and court costs.

15 **SEC. 5. EXCEPTIONS.**

16 This Act shall not apply to the following:

17 (1) lawfully incarcerated and institutionalized
18 individuals lacking the right or ability to meaning-
19 fully provide informed consent or informed refusal;

20 (2) courts of law issuing individualized court or-
21 ders specific to one individual, provided the court
22 order applies strict scrutiny following a hearing af-
23 fording due process of law to the individual affected;
24 or

25 (3) Federal, State, and local emergencies where
26 the governing authority has first formally applied to

the President of the United States of America for a NICE exception, and provided that the President in his discretion formally authorizes the requested exception based on the following criteria proven by the governing authority: (i) compliance with the procedure in section 5(b) would be materially impractical, (ii) the requested NICE exception would not materially interfere with National Security, and (iii) short-term and long-term side effects from the vaccination, including serious injuries and deaths, have been proven to occur in less than 1 in 200,000 individuals.

13 SEC. 6. EVALUATION OF VACCINATED COMPARED TO
14 UNVACCINATED AMERICANS.

15 (a) The United States Surgeon General shall imme-
16 diately commence an independent evaluation of the CDC
17 vaccination schedule, and also an independent evaluation
18 of COVID–19 vaccination.

19 (b) The independent evaluations shall be performed
20 by a Vaccine Safety Commission comprised of 30 physi-
21 cians and scientists, appointed by the United States Sur-
22 geon General. Commission members shall not have any
23 current or previous ownership interest, or any current or
24 previous consulting or employment relationship, with any
25 manufacturer of a vaccine.

1 (c) All evaluation details, communications, results,
2 and analyses of the Commission shall be made publicly
3 available.

4 (d) The risk of permanent disability and death from
5 the vaccine, alone and in combination with other vaccines,
6 shall be measured objectively by review of biological stud-
7 ies and epidemiological surveys of completely unvaccinated
8 persons who have received no vaccines in life, compared
9 to persons who have received various vaccines under eval-
10 uation. The risk of permanent disability and death caused
11 by an infectious disease shall be measured objectively by
12 national vital statistics for the 10 years before the first
13 vaccine for that disease was first introduced for public use.

14 (e) Independent evaluations shall be made of poten-
15 tial therapeutic medications for diseases for which vac-
16 cines have been produced, including consideration of stud-
17 ies done on such medications.

18 (f) At the completion of the evaluation on July 1,
19 2026, the Committee shall produce a report that shall be
20 provided to each Member of Congress.

